

ORIGINAL

CIVIL RIGHTS COMPLAINT
42 U.S.C. § 1983

FILED
IN CLERK'S OFFICE
U.S. DISTRICT COURT E.D.N.Y.
★ AUG - 9 2010 ★

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

BROOKLYN OFFICE

CLAYTON JOHNSON 141-09-03051
Full name of plaintiff/prisoner ID#

CV 10 - 3701

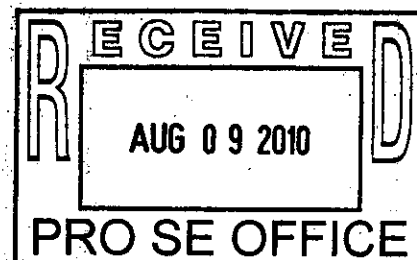
Plaintiff,

JURY TRIAL DEMAND
YES ☒ NO ☐

-against-
MR. JOSEPH PERRY
MS. ANITA T. CHANDRAN
Individual Capacity
Enter full names of defendants
[Make sure those listed above are
identical to those listed in Part III.]

DEARIE, CH. J.
BLOOM, M.J.

Defendants.



I. Previous Lawsuits:

- A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes () No (☒)
- B. If your answer to A is yes, describe each lawsuit in the space below (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1. Parties to this previous lawsuit:

Plaintiffs:

Defendants:

2. Court (if federal court, name the district; if state court, name the county)

3. Docket Number:

4. Name of the Judge to whom case was assigned: X

5. Disposition: (for example: Was the case dismissed? Was it appealed? Is it still pending?)
X

6. Approximate date of filing lawsuit: X

7. Approximate date of disposition: X

II. Place of Present Confinement: G.R.V.C. 09-09
N.M.C.K. 18-18 Mazen St, E. Elmhurst, N.Y.

A. Is there a prisoner grievance procedure in this institution? Yes (☒) No ()

B. Did you present the facts relating to your complaint in the prisoner grievance procedure? Yes () No (☒)

C. If your answer is YES,

1. What steps did you take? X

2. What was the result? X

D. If your answer is NO, explain why not X

E. If there is no prison grievance procedure in the institution, did you complain to prison authorities? Yes () No (☒)

F. If your answer is YES,

1. What steps did you take? X

2. What was the result? X

III. Parties:

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of plaintiff CHAYTON Johnson
Address 09-09 18-18 HAZEN ST. E. Finkhorst N.Y. 11730

(In item B below, place the full name and address of each defendant)

B. List all defendants' names and the addresses at which each defendant may be served. Plaintiff must provide the address for each defendant named.

Defendant No. 1

MR. JOSEPH TERRY Det. 3 ^{Shield #} 1929
70th Det 154 LAWRENCE Ave
Brooklyn, N.Y. 11238

Defendant No. 2

A.A. Anita T. Channapati
350 Jay Street
Brooklyn, N.Y. 11201

Defendant No. 3

Defendant No. 4

Defendant No. 5

[Make sure that the defendants listed above are identical to those listed in the caption on page 1.]

IV. Statement of Claim:

(State briefly and concisely, the facts of your case. Include the date(s) of the event(s) alleged as well as the location where the events occurred. Include the names of each defendant and state how each person named was involved in the event you are claiming violated your rights. You need not give any legal arguments or cite to cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. You may use additional 8 1/2 by 11 sheets of paper as necessary.)

On the chb of February 23, 2009. I Clayton Johnson who
arrested on an Arrest Warrant - for Spiking People. This warrant
also issued January 8, 2009. On the chb of arrest (2-23-09) officer
Joseph Perry and A.D.A. ANITA T. CHANNIA PATI; inter-
rogated me without the having any Counsel present which I have learned
is a violation of "SAMUEL'S Rule". People v. Samuel 421
N.Y. 2d 892 (1980). And also a violation of My Civil & Constitu-
tional Rights. Further more Samuel's Rule goes on to state that
once recording have lawfully commenced by the filing of an accusatory inst-
rument or an Arrest Warrant - this gives the police the questioning
detached in the absence of Counsel. And that the waiver of Miranda
rights Counsel be made without the assistance of Counsel. The right
to Counsel attaches; Counsel be waived except in Counsel's presence.

IV. A

If you are claiming injuries as a result of the events you are complaining about, describe your injuries and state what medical treatment you required. Was medical treatment received?

A graph on lined paper showing two intersecting lines. The line with the positive slope passes through the points (0, 0) and (3, 2). The line with the negative slope passes through the points (0, 6) and (3, 2). The two lines intersect at the point (3, 2).

V. Relief:

State what relief you are seeking if you prevail on your complaint.

If I prevail on my Complaint I would be seeking \$1,000,000. for the pain & suffering and also mental anguish that I have been through while being detained on Rikers Island. I am also seeking for the past 2 1/2 years. Due to my rights being violated by said defendants.
Money Damages.

I declare under penalty of perjury that on July 27, 2010, I delivered this
(Date)
complaint to prison authorities to be mailed to the United States District Court for the Eastern
District of New York.

Signed this 27th day of July, 20 10. I declare under penalty of
perjury that the foregoing is true and correct.

Clayton Johnson
Signature of Plaintiff

A.M.H.C. / G.R.V.C.
Name of Prison Facility

09-09
18-18 Hazen St

E. Elmhurst N.Y. 11730

Address

141-09-0305-1

Prisoner ID#